SEC Potential persons who are to respond to the collection of information contained in 1972 (6- this form are not required to respond unless the form displays a currently valid 02)OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

PROCESSED

FORM D

MAR 1 8 2005 hours per response... 1

> SEC USE ONLY Prefix Serial

DATE RECEIVED

MAR 2 2 2005 THOMSON FINANCIAL

NOTICE OF SALE OF SECURITYE PURSUANT TO REGULATION D **SECTION 4(6), AND/OR**

UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering ([] check if this is an amendment and name has changed, and indicate change))
Microplate Automation, Inc. – Series A Convertible Preferred Stock	

Filing Under (Check/box(es) that [] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) [] ULOE apply): Type of Filing: [] New Filing [X] Amendment

A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer

Name of Issuer ([X] check if this is an amendment and name has changed, and indicate change.) (formerly known as Microplate Automation, Inc.) Cerionx, Inc.

Address of Executive Offices

(Number and Street, City, State, Zip Code)

Telephone

Number (Including Area Code)

4300 Haddonfield Road, Suite 117, Pennsauken, NJ 08109

(856) 963-5534

Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)

Not applicable.

Brief Description of Business								
Development and sale of plasma cleaning devices.								
Type of Business Organiz	zation							
[X] corporation	[] limited partnership, already formed [] other (please specify):						
[] business trust	[] limited partnership, to be formed							
	Month Year							
Actual or Estimated Date	of Incorporation or Organization: [0] [5] [0] [0]	[X] Actual [] Estimated						
Jurisdiction of Incorporation	on or Organization: (Enter two-letter U.S. Postal Service CN for Canada; FN for other foreign juri							

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address. Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of,
 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[X] Promoter [X] I	Beneficial Owner	[X] Executive	e Officer [X]	Director	[]	General and/o Managing Partner
Full Name (Last nam Hensley, Paul	e first, if individual)						
Business or Residence 5 Kendles Run Ro	•		City, State, Zip	Code)			
Check Box(es) that Apply:	[] Promoter []	Beneficial Owner	[] Executive	Officer [X]	Director	[]	General and/o Managing Partner
Full Name (Last nam Gust, William	e first, if individual)						
Business or Residence 4300 Haddonfield	•		•	Code)			
Check Box(es) that Apply:	[] Promoter []	Beneficial Owner	[] Executive	Officer [X]	Director	[]	General and/o Managing Partner
Full Name (Last nam Winters, Guy	e first, if individual)	·				-	
Business or Resident 4300 Haddonfield	·		•	Code)			
Check Box(es) that Apply:	[] Promoter []	Beneficial Owner	[] Executive	e Officer [X]	Director	[]	General and/o Managing Partner
Full Name (Last nam Falkenstein, Josep	·						
Business or Resident 4300 Haddonfield	•		•	Code)			
Check Box(es) that Apply:	[] Promoter []	Beneficial Owner	[] Executive	e Officer [X]	Director	[]	General and/o Managing Partner
Full Name (Last nam Chamberlain, Jame			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				
Business or Residen 4300 Haddonfield	ce Address (Numbo 1 Road, Suite 117			Code)			

Check Box(es) that Apply:	[] Promoter []	Beneficial Owner	[] Executive Officer [X] Director	[] General and/o Managing Partner
Full Name (Last name Serum, James	e first, if individual)			
Business or Residence 4300 Haddonfield			• •	
Check Box(es) that Apply:	[] Promoter [X]	Beneficial Owner	[] Executive Officer [] Director	[] General and/o Managing Partner
Full Name (Last name	e first, if individual)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Anthem Capital II	I, L.P.			
Business or Residence The Mangels Buil	•		City, State, Zip Code) ghway, Baltimore, MD 21230	
Check Box(es) that Apply:	[] Promoter [X]	Beneficial Owner	[] Executive Officer [] Director	[] General and/o Managing Partner
Full Name (Last name	e first, if individual)			
PA Early Stage Pa	artners III, L.P.			
Business or Residence 435 Devon Park I	•		City, State, Zip Code) , Wayne, PA 19087	Market and the Control of the Contro
Check Box(es) that Apply:	[] Promoter [X]	Beneficial Owner	[] Executive Officer [] Director	[] General and/o Managing Partner
Full Name (Last name	e first, if individual)			
NJTC Venture Fund	d SBIC, L.P.			
Business or Residence 1001 Briggs Road	•		City, State, Zip Code) 08054	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				B. IN	IFORMA	TION A	BOUT O	FFERING	3			
	s the issi	uer sold	, or does	s the iss	uer inten	d to sell	, to non-	accredite	d investo	ors in this	6	Yes No
			Ansv	ver also	in Apper	ndix, Col	umn 2, it	f filing un	der ULO	E.		
2. Wh	at is the	minimu	m invest	ment th	at will be	accepte	ed from a	any indivi	dual?	• • • • • • • • • • • • • • • • • • • •		\$N/A
3. Do	es the of	fering p	ermit joir	nt owner	ship of a	single u	ınit?		•••••			Yes No [X]
or indi with sa broked dealer	irectly, a ales of s r or deale r. If more	ny comr ecurities er regist than fiv	mission of the control of the contro	or simila offering. h the SE ersons to	r remund If a pers EC and/o	eration fo on to be or with a d are as	or solicita listed is state or s sociated	states, lis	urchaser ciated pe st the nar	rs in conterson or a me of the a broker		
Full N	ame (La	st name	first, if i	ndividua	al)							
Busin	ess or R	esidenc	e Addre	ss (Num	ber and	Street, 0	City, Stat	e, Zip Co	ode)			
Name	of Asso	ciated E	Broker or	Dealer								
States	in Whic	h Perso	n Listed	Has Sc	licited or	Intends	to Solic	it Purcha	sers		······································	
(Chec	k "All St	ates" or	check ir	ndividua	l States)					[] All State	es
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	ame (La	st name	first, if i	ndividua	al)						*	
Busin	ess or R	esidenc	e Addre	ss (Num	ber and	Street, 0	City, Stat	e, Zip Co	ode)	·	_	
Name	of Asso	ciated E	Broker or	Dealer								
States	s in Whic	h Perso	n Listed	Has Sc	licited o	r Intends	to Solic	it Purcha	sers			
(Chec	k "All St	ates" or	check ir	ndividua	l States)					[] All State	es
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[MT]	[1AI]	[144]	figi.il	[140]	[, ,,,,]	[14.1]	[.,0]	[]	[0.1]	[0,4]	[• , ,]	[, , ,]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering
and the total amount already sold. Enter "0" if answer is "none" or "zero."
If the transaction is an exchange offering, check this box "and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security Debt	Aggregate Offering Price \$0	Amount Already Sold \$0
Equity	\$ 3,250,000	\$ <u>1,799,805</u>
[] Common [X] Preferred	•	
Convertible Securities (including warrants) Partnership Interests Other (Specify). Total	\$ 0 \$ 0 \$ 0 \$ 3,250,000	\$0 \$0 \$0 \$_1,799,805
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
Accredited Investors	Number Investors 3 0	Aggregate Dollar Amount of Purchases \$_1,799,805 \$0 \$
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Not Applicable		
Type of offering Rule 505	Type of Security	Dollar Amount Sold \$
Regulation A Rule 504		_\$ \$
Total		\$

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

Engineering Fees

(1) Offering is made pursuant to the terms of a Second Stock Purchase Agreement and Amendment to the Original Stock Purchase Agreement. The Original Stock Purchase Agreement (as amended) anticipates that a milestone closing will take place if certain milestones are achieved. Amount indicated reflects the amount received by the issuer at, net of expenses incurred in connection with, the first closing and the interim closing. Another amendment to Form D will be filed if the milestone closing occurs.

\$<u>1,709,805(1)</u>

[]\$

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

solely to organization expenses of the issuer. The information may be

	Payments to	
	Officers, Directors, & Affiliates	Payments To Others
Salaries and fees	[] \$	[] \$ <u>75,000</u>
Purchase of real estate	[]\$	[]\$
Purchase, rental or leasing and installation of machinery and equipment	[]\$	[]\$
Construction or leasing of plant buildings and facilities	[]\$	[]\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]\$	[]\$
Repayment of indebtedness	[X] \$ <u>65,000</u>	[] \$
Working capital	[] \$ <u>1,659,805</u>	[] \$
Other (specify):	[] \$	[]\$
	[]\$	[]\$
Column Totals	[X] \$ <u>1,724,805</u>	[]\$_75,000
Total Payments Listed (column totals added)	[X] \$	<u> 1,799,805</u>

D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.							
Cerionx, Inc.	facel Heusle	March 14, 2005					
Name of Signer (Print or Type)	Title of Signer (Print or Type)	X					

Paul Hensley

Title of Signer (Print or Type)
President and Chief Executive Officer

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE 1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? Yes No [] [x]

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Cerionx, Inc.	foul faisbey	March 14, 2005
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Paul Hensley	President and Chief Executive Officer	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2		3			4		5		
	Intend to non-accordinvestors (Part B-I	credited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)						Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL	162	INO	PR-102	investors	Amount	investors	Amount	162	INO	
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OR							
PA	X	Preferred Stock \$553,439.71	1	\$553,439.71	0	0	Х
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http://www.sec.gov/divisions/corpfin/forms/formd.htm Last update: 06/06/2002